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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION			Attorney Docket Num First Named Inventor	Daniel A Cilber
			COMPLETE IF KNOWN	
(37 CFR 1.63)		Application Number	1	
□ Declaration Submitted	OR	☐Declaration Submitted after Initial	Filing Date	
With Initial Filing	Filing (surcharge (37 CFR 1.16 (e)) required)	Filing (surcharge	Group Art Unit	
		Examiner Name		

As a below named inventor, I hereby declare that:									
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
DUAL ELECTRODE WITH THREE STUDS FOR IMPEDANCE CARDIOGRAPHY									
the specification of which (Title of the Invention)									
⊠ is attached hereto									
OR									
□ was filed on (MM/DD/YYYY) as United States Application Number or PCT International									
Application Number and was amended on (MM/DD/YYYY) (if applicable).									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.									
l acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application		Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?					
Number(s)	Country			YES	NO				
			$\overline{\Box}$	П	$\overline{\Box}$				
				\Box	$\overline{\Box}$				
Additional foreign applicat			DTO/000/000						

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

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Direct all correspondence to:	Customer Numb		24737	7	OR	Corresponda	nce address below	
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Country			Teleph	one		Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor								
Given Name Danie (first and middle [if any])	·	Family Name Silber or Surname			r			
Inventor's Signature	l a S.	lben			Date X	9 JAN ?	2004	
Lexington		MA		USA		USA		
Residence: City		State		Coun	try	Citizenship		
11 Percy Road Mailing Address								
Lexington		МА		02421		USA		
City		State		Zip		Country		
NAME OF SECOND INVENTO	R: Ap	etition has b	een file	d for th	is unsigr	ed inventor	_	
Given Name (first and middle [if any])				ily Nam urname				
Inventor's Signature					Date			
Desidence Otto					_			
Residence: City		State		Count	try	Citizenship		
Mailing Address		T						
City		State		Zip		Courter		
Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								
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